

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.ny.gov>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: August 9, 2011

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Todd Kayser
Purchasing Officer I
(518) 474-4501
todd.kayser@ogs.ny.gov

CONTRACT PERIOD: November 1, 2002 -
October 31, 2012

CONTRACTOR/ Sanofi Pasteur Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICING UPDATE

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

Contract pricing has been updated to reflect the CDC pricing as of July 18, 2011

The updated pricing can be viewed by going to this link on the OGS website
<http://www.ogs.ny.gov/purchase/spg/awards/1020002542CAN.HTM>

If you have any questions please contact the Purchasing Officer listed above.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: November 6, 2010

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

Todd Kayser
Purchasing Officer I
(518) 474-4501
todd.kayser@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2012

CONTRACTOR/ Sanofi Pasteur Inc.
CONTRACT NO.: PC59776

SUBJECT: Instructions for recovering Federal Excise Tax on unused influenza vaccines

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

Unused Influenza vaccine's can be returned for a full credit of the Federal Excise Tax (FET) only. No credit will be given for the vaccine only the FET will be credited.

- For multi-dose vials containing 10-doses, the refund amount would be \$7.50 per vial.
- For packages of 10 single-dose syringes, the refund amount would be \$7.50 per package.
- For packages of 5 single-dose syringes, the refund amount would be \$3.75 per package.

The Department of Health can contact Sanofi Pasteur at 1-800-VACCINE to obtain return instructions. Once product is returned customers will receive applicable excise tax that can be applied to their account for a future purchase or the customer can request a check.

If you have any questions please contact the Purchasing Officer listed above.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: April 26, 2010

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

James R. Essman
Purchasing Officer I
(518) 474-4501
james.essman@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2012

CONTRACTOR/ Sanofi Pasteur Inc.
CONTRACT NO.: PC59776

SUBJECT: UPDATED PRICING / DELETION OF PRODUCT / REVISED AWARD

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

Contract pricing has been updated to reflect the CDC pricing as of April 23, 2010.

The following vaccines have been deleted from the contract:

Vaccine Description	PKG Qty	N.D.C.
Trihibit Vaccine 5 x 1 Dose Vials	5	49281-597-05
Ipol, 10 x 1 Dose, Syringe SG	10	49281-860-55

In addition, the contract award has been revised to reflect the update CDC pricing.

The revised award can be viewed by utilizing the OGS website at www.ogs.state.ny.us

If you have any questions please contact the Purchasing Officer listed above.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: February 22, 2010

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

James R. Essman
Purchasing Officer I
(518) 474-4501
james.essman@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2012

CONTRACTOR/ Sanofi Pasteur Inc.
CONTRACT NO.: PC59776

SUBJECT: CONTRACT RENEWAL / UPDATED PRICING / REVISED AWARD

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

The above referenced contract with Sanofi Pasteur has been renewed through October 31, 2012.

Contract pricing has been updated to reflect the CDC pricing as of February 16, 2010.

In addition, the contract award has been revised to reflect previously posted Purchasing Memorandums including the updated CDC pricing and the increased Procurement Card per order threshold of \$15,000.00.

The revised award can be viewed by utilizing the OGS website at www.ogs.state.ny.us

If you have any questions please contact the Purchasing Officer listed above.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: May 18, 2009

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2009

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective immediately, the following price list for vaccines has been updated to include CDC pricing from Sanofi Pasteur. Please review the following when placing orders. To place an order, please call 1-800-VACCINE, or visit Sanofi Pasteur's web site at www.vaccineshoppe.com. Upon CDC compliance, requirement is then forwarded to Sanofi Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Federally mandated surcharges on certain pediatric vaccines are shown where applicable. Return restrictions are also shown where they apply.

Should you have any questions concerning CDC ordering, please feel free to call Jill Bingham of Sanofi Pasteur at (800) 822-2463. You may also call this office at (518) 474-4723 or e-mail jason.wilkie@ogs.state.ny.us.

Current contract pricing for Sanofi Pasteur appears in the table below:

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Daptacel Vaccine, 10 x 1 Dose Vials	10	49281-286-10	\$115.00	\$22.50	\$137.50
Decavac Vaccine, 10 x 1, UD Syringe	10	49281-291-10	\$166.70	\$15.00	\$181.70

(Continued)

Vaccine Description	Doses per Case	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Decavac Vaccine, 10 x 1, Vial	10	49281-291-83	\$166.70	\$15.00	\$181.70
Tripedia Vaccine (Preservative Free)	10	49281-298-10	\$110.00	\$22.50	\$132.50
Adacel Vaccine 10 x 1 Dose Vial	10	49281-400-10	\$285.00	\$22.50	\$307.50
Adacel 5 x 1 syringe	5	49281-400-15	\$142.50	\$11.25	\$153.75
Pentacel Vaccine 5 x 1 Dose Vial	5	49281-510-05	\$238.70	\$18.75	\$257.45
Acthib Vaccine 5 x 1 Dose	5	49281-545-05	\$39.55	\$3.75	\$43.30
Menactra Vaccine 5 single Dose Vials	5	49281-589-05	\$396.90	\$3.75	\$400.65
Trihibit Vaccine 5 x 1 Dose Package PR Fre	5	49281-597-05	\$121.55	\$15.00	\$136.55
Ipol Vaccine 10 Dose Vial	10	49281-860-10	\$107.60	\$7.50	\$115.10
Ipol, 10 x 1 Dose, Syringe SG	10	49281-860-55	\$107.60	\$7.50	\$115.10

All other terms and conditions remain the same.

Please adjust your records accordingly.

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<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: September 4, 2008

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2009

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: Contact Information Update

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective September 15, 2008, contact information for contractor Sanofi Pasteur is as follows:

Jill Bingham
Telephone: 570-957-3486
Fax: 570-957-3272
E-mail: jill.bingham@sanofipasteur.com
Website: www.vaccineshoppe.com

All other terms and conditions remain the same. Please adjust your records accordingly.

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<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: August 5, 2008

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2009

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective August 1, 2008, the following price list for vaccines has been updated to include CDC pricing from Sanofi Pasteur. Please review the following when placing orders. To place an order, please call 1-800-VACCINE, or visit Sanofi Pasteur's web site at www.vaccineshoppe.com. Upon CDC compliance, requirement is then forwarded to Sanofi Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Federally mandated surcharges on certain pediatric vaccines are shown where applicable. Return restrictions are also shown where they apply.

Should you have any questions concerning CDC ordering, please feel free to call Jill Bingham of Sanofi Pasteur at (800) 822-2463. You may also call this office at (518) 474-4723 or e-mail jason.wilkie@ogs.state.ny.us.

Current contract pricing for Sanofi Pasteur appears in the table below:

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Daptacel Vaccine, 10 x 1 Dose Vials	10	49281-286-10	\$110.00	\$22.50	\$132.50
Decavac Vaccine, 10 x 1, UD Syringe	10	49281-291-10	\$158.80	\$15.00	\$173.80

(Continued)

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Decavac Vaccine, 10 x 1, Vial (Adult)	10	49281-291-83	\$158.80	\$15.00	\$173.80
Tripedia Vaccine (Preservative Free)	10	49281-298-10	\$104.00	\$22.50	\$126.50
Adacel Vaccine 10 x 1 Dose Vial	5	49281-400-10	\$285.00	\$22.50	\$307.50
Adacel 5 x 1 syringe	10	49281-400-15	\$142.50	\$11.25	\$153.75
Pentacel Vaccine 5 x 1 Dose Vial	20	49281-510-05	\$231.75	\$18.75	\$250.50
Acthib Vaccine 5 x 1 Dose	1	49281-545-05	\$39.45	\$3.75	\$43.20
Menactra Vaccine 5 single Dose Vials	10	49281-589-05	\$378.00	\$3.75	\$381.75
Menacta 5 x 1 Syringe	10	49281-589-15	\$378.00	\$3.75	\$381.75
Trihibit Vaccine 5 x 1 Dose Package PR Fre	20	49281-597-05	\$119.40	\$15.00	\$134.40
Ipol Vaccine 10 Dose Vial	100	49281-860-10	\$107.30	\$7.50	\$114.80
Ipol, 10 x 1 Dose, Syringe SG	100	49281-860-55	\$107.30	\$7.50	\$114.80

All other terms and conditions remain the same.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: June 16, 2008

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
 Purchasing Officer I
 (518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2009

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective April 1, 2008, the following price list for Pediatric Vaccines has been updated to include CDC pricing from Sanofi Pasteur. Please review the following when placing orders. To place an order, please call 1-800-VACCINE, or visit Sanofi Pasteur's web site at www.vaccineshoppe.com. Upon CDC compliance, requirement is then forwarded to Sanofi Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Federally mandated surcharges on certain pediatric vaccines are shown where applicable. Return restrictions are also shown where they apply.

Should you have any questions concerning CDC ordering, please feel free to call Jay Julian of Sanofi Pasteur at (570) 839-4745. You may also call this office at (518) 474-4723 or e-mail jason.wilkie@ogs.state.ny.us.

Current contract pricing for Sanofi Pasteur appears in the table below:

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatrics Vaccines					
Daptacel Vaccine, 10 x 1 Dose Vials	10	49281-0286-10	\$110.00	\$22.50	\$132.50
Decavac Vaccine, 10 x 1, UD Syringe	10	49281-0291-10	\$158.80	\$15.00	\$173.80
Decavac Vaccine, 10 x 1, Vial	10	49281-0291-83	\$158.80	\$15.00	\$173.80

(Continued)

(Adult)					
Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatrics Vaccines					
Tripedia Vaccine (Preservative Free)	10	49281-0298-10	\$104.00	\$22.50	\$126.50
Adacel Vaccine 10 x 1 Dose Vials	5	49281-0400-10	\$285.00	\$22.50	\$307.50
Acthib Vaccine 5 x 1 Dose	160	49281-0545-05	\$39.45	\$3.75	\$43.20
Menactra Vaccine 5 single Dose Vials	2	49281-0589-05	\$378.70	\$3.75	\$381.75
Trihibit Vaccine 5 x 1 Dose Package	20	49281-0597-05	\$119.55	\$15.00	\$134.40
Ipol Vaccine 10 Dose Vial	100	49281-860-10	\$107.30	\$7.50	\$114.80
Ipol, 10 x 1 Dose, Syringe SG	100	49281-860-55	\$107.30	\$7.50	\$114.80

All other terms and conditions remain the same.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: February 26, 2008

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2009

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective February 5, 2008, the following price list for Pediatric Vaccines has been updated to include CDC pricing from Sanofi Pasteur. Please review the following when placing orders. To place an order, please call 1-800-VACCINE, or visit Sanofi Pasteur's web site at www.vaccineshoppe.com. Upon CDC compliance, requirement is then forwarded to Sanofi Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Federally mandated surcharges on certain pediatric vaccines are shown where applicable. Return restrictions are also shown where they apply.

Should you have any questions concerning CDC ordering, please feel free to call Jay Julian of Sanofi Pasteur at (570) 839-4745. You may also call this office at (518) 474-4723 or e-mail jason.wilkie@ogs.state.ny.us.

Current contract pricing for Sanofi Pasteur appears in the table below:

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatric Vaccines					
Daptacel Vaccine, 10 x 1 Dose Vials	10	49281-286-10	\$110.00	\$22.50	\$132.50
Decavac Vaccine, 10 x 1, UD Syringe	10	49281-291-10	\$158.80	\$15.00	\$173.80
Decavac Vaccine, 10 x 1, Vial	10	49281-291-83	\$158.80	\$15.00	\$173.80

(Continued)

(Adult)					
Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatrics Vaccines					
Tripedia Vaccine (Preservative Free)	10	49281-298-10	\$104.00	\$22.50	\$126.50
Adacel Vaccine 10 x 1 Dose Vials	5	49281-400-10	\$285.00	\$22.50	\$307.50
Acthib Vaccine 5 x 1 Dose	160	49281-545-05	\$36.85	\$3.75	\$40.60
Menactra Vaccine 5 single Dose Vials	2	49281-589-05	\$361.70	\$3.75	\$365.45
Menactra 5 x 1 Syringe	2	49281-589-15	\$361.70	\$3.75	\$365.45
Trihibit Vaccine 5 x 1 Dose Package	20	49281-597-05	\$114.55	\$15.00	\$129.55
Ipol Vaccine 10 Dose Vial	100	49281-860-10	\$103.10	\$7.50	\$110.60
Ipol, 10 x 1 Dose, Syringe SG	100	49281-860-55	\$103.10	\$7.50	\$110.60

All other terms and conditions remain the same.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: December 18, 2007

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2009

CONTRACTORS/ Sanofi Pasteur Inc./PC59776
CONTRACT NOS.: Glaxo SmithKline /PC59777

SUBJECT: CONTRACT AMENDMENT / RENEWAL OF AWARD

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

The above referenced contract has been amended to include a revised Contract Period & Renewal clause allowing for an additional contract period of up to five (5) years.

Subsequently, the above referenced contract with Sanofi Pasteur has been renewed through October 31, 2009.

The contract with Glaxo SmithKline had expired on November 30, 2007. A renewal of the contract through October 31, 2009 with Glaxo SmithKline is pending.

Please adjust your records accordingly.

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PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: October 25, 2007

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
November 30, 2007

CONTRACTORS:/ Sanofi Pasteur Inc./PC59776
CONTRACT NO.S: GlaxoSmithKline /PC59777

SUBJECT: 30 DAY SHORT TERM EXTENSION

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

The above referenced contracts with Sanofi Pasteur and GlaxoSmithKline have been extended through November 30, 2007.

All other terms and conditions remain the same.

Please adjust your records accordingly.

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<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: August 23, 2007

GROUP: 10200 – Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
 Purchasing Officer I
 (518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: GlaxoSmithKline
CONTRACT NO.: PC59777

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective August 24, 2007, the contract has been updated to reflect a price increase for the Pediarix Vaccines and changes in the NDC numbers for some products. The prices for the Adult Vaccines shall remain unchanged.

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Pediatric Vaccines						
Havrix 720 EL.U/0.5mL Single Dose Vials	10	58160-825-11	\$11.50	\$115.10	\$12.25	\$122.50
Havrix 720 EL.U/0.5mL Prefilled Disposable Tip-Loks Syringe w/out needles	5	58160-825-46	\$11.50	\$57.50	\$12.25	\$61.25
Twinrix 1.0 mL Single Dose Vials	10	58160-815-11	\$36.54	\$365.40	\$37.64	\$376.40
Twinrix 720 EL.U./mL PrefilledTip-Lok Syringe w/out needles	5	58160-815-46	\$36.54	\$182.70	\$37.64	\$188.20
Engerix-B 10 mcg/0.5mL Single Dose Vial	10	58160-820-11	\$8.35	\$83.50	\$9.10	\$91.00
Engerix-B 10 mcg/0.5mL Prefilled Disposable Tip-Loks Syringe w/out needles	5	58160-820-46	\$8.35	\$41.75	\$9.10	\$45.50

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Pediatric Vaccines						
Infanrix 0.5 mL Single-Dose Vials	10	58160-840-11	\$11.00	\$110.00	\$13.25	\$132.50
Infanrix 0.5mL Prefilled Disposable Tip-Loks Syringe w/out needles	5	58160-840-46	\$11.00	\$55.00	\$13.25	\$66.25
Boostrix 0.5 mL Single Dose Vials	10	58160-842-11	\$28.50	\$285.00	\$30.75	\$307.50
Boostrix 0.5 mL PrefilledTip-Lok Syringe w/out needles	5	58160-842-46	\$28.50	\$142.50	\$30.75	\$153.75
Pediarix 0.5mL Single Dose Vial	10	58160-811-11	\$43.50	\$435.00	\$47.25	\$472.50
Pediarix 0.5mL Prefilled Disposable Tip-Loks Syringe w/out needles	5	58160-811-46	\$43.50	\$217.50	\$47.25	\$236.25

All other terms and conditions remain the same.

Please adjust your records accordingly.

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<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: June 20, 2007

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
 Purchasing Officer I
 (518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: GlaxoSmithKline
CONTRACT NO.: PC59777

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective June 11, 2007, the contract has been updated to reflect price decreases for the Adult Vaccines and changes in the NDC numbers for some products. The prices for the Pediatric Vaccines shall remain unchanged.

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Adult Vaccines						
Havrix Single Dose 1440 EL.U./mL Vial	10	58160-835-11	\$18.11	\$181.10	\$18.86	\$188.60
Havrix Tip-Loks 1440 EL.U./mL- Prefilled Tip-Lok Syringe w/out needles	5	58160-826-46	\$18.11	\$90.55	\$18.86	\$94.30
Twinrix Single Dose 720 EL.U./mL Vial	10	58160-850-11	\$36.14	\$361.40	\$37.64	\$376.40
Twinrix 720 EL.U./mL Prefilled Tip-Lok Syringe w/out needles	5	58160-815-46	\$36.14	\$180.70	\$37.64	\$188.20
Engerix-B Single Dose 20 Mcg/mL-Vial	10	58160-857-11	\$23.98	\$239.80	\$24.73	\$247.30
Engerix-B PF Tip-Loks 20 Mcg/mL	5	58160-821-46	\$23.98	\$119.90	\$24.73	\$123.65

All other terms and conditions remain the same.

Please adjust your records accordingly.

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: April 24, 2007

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective April 25, 2007, the following price list for Pediatric Vaccines has been updated to include CDC pricing from Sanofi Pasteur. Please review the following when placing orders. To place an order, please call 1-800-VACCINE, or visit Sanofi Pasteur's web site at www.vaccineshoppe.com. Upon CDC compliance, requirement is then forwarded to Sanofi Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Federally mandated surcharges on certain pediatric vaccines are shown where applicable. Return restrictions are also shown where they apply.

Should you have any questions concerning CDC ordering, please feel free to call Jay Julian of Sanofi Pasteur at (570) 839-4745. You may also call this office at (518) 474-4723 or e-mail jason.wilkie@ogs.state.ny.us.

Current contract pricing for Sanofi Pasteur appears in the table below:

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatric Vaccines					
Daptacel Vaccine, 10 x 1 Dose Vials	10	49281-286-10	\$110.00	\$22.50	\$132.50
Decavac Vaccine, 10 x 1, UD Syringe	10	49281-291-10	\$158.80	\$15.00	\$173.80
Decavac Vaccine, 10 x 1, Vial	10	49281-291-83	\$158.80	\$15.00	\$173.80

(Continued)

(Adult)					
Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatrics Vaccines					
Tripedia Vaccine (Preservative Free)	10	49281-298-10	\$104.00	\$22.50	\$126.50
Adacel Vaccine 10 x 1 Dose Vials	5	49281-400-10	\$295.00	\$22.50	\$317.50
Acthib Vaccine 5 x 1 Dose	160	49281-545-05	\$37.65	\$3.75	\$41.40
Menactra Vaccine 5 single Dose Vials	2	49281-589-05	\$361.70	\$3.75	\$365.45
Menactra 5 x 1 Syringe	2	49281-589-15	\$361.70	\$3.75	\$365.45
Trihibit Vaccine 5 x 1 Dose Package	20	49281-597-05	\$114.55	\$15.00	\$129.55
Ipol Vaccine 10 Dose Vial	100	49281-860-10	\$103.10	\$7.50	\$110.60
Ipol, 10 x 1 Dose, Syringe SG	100	49281-860-55	\$103.10	\$7.50	\$110.60

All other terms and conditions remain the same.

Please adjust your records accordingly.

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: March 6, 2007

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
Purchasing Officer I
(518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

The following price list for Pediatric Vaccines has been updated to include CDC pricing from Sanofi Pasteur. Please review the following when placing orders. Sanofi Pasteur holds a New York State Contract for vaccine products, orders for products eligible for CDC pricing must be processed through the CDC. Orders are to be entered electronically into the VACMAN System. Upon CDC approval, requirement is then forwarded to Sanofi Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Should you have any questions concerning CDC ordering, please feel free to call Jay Julian of Sanofi Pasteur at (570) 839-4745. You may also call this office at (518) 474-4723 or e-mail jason.wilkie@ogs.state.ny.us.

Current contract pricing for Sanofi Pasteur appears in the table below:

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatrics Vaccines					
Daptacel Vaccine, 10 x 1 Dose Vials	10	49281-286-10	\$105.00	\$22.50	\$127.50
Decavac Vaccine, 10 x 1, UD Syringe	10	49281-291-10	\$151.20	\$15.00	\$166.20
Decavac Vaccine, 10 x 1, Vial (Adult)	10	49281-291-83	\$151.20	\$15.00	\$166.20

Vaccine Description	Min Qty	N.D.C.	Contract Price Per Pack	FET Per Pack	Contract Price Per Pack With FET
Pediatrics Vaccines					
Tripedia Vaccine (Preservative Free)	10	49281-298-10	\$100.00	\$22.50	\$122.50
Adacel Vaccine 10 x 1 Dose Vials	5	49281-400-10	\$285.00	\$22.50	\$307.50
Acthib Vaccine 5 x 1 Dose	160	49281-545-05	\$35.85	\$3.75	\$39.60
Menactra Vaccine 1 Dose Vial	10	49281-589-01	\$68.00	0.00	\$68.00
Menactra Vaccine 5 single Dose Vials	2	49281-589-05	\$340.00	\$3.75	\$343.75
Menactra 5 x 1 Syringe	2	49281-589-15	\$340.00	\$3.75	\$343.75
Trihibit Vaccine 5 x 1 Dose Package	20	49281-597-05	\$109.70	\$15.00	\$124.70
Ipol Vaccine 10 Dose Vial	100	49281-860-10	\$100.70	\$7.50	\$108.20
Ipol, 10 x 1 Dose, Syringe SG	100	49281-860-55	\$100.70	\$7.50	\$108.20

All other terms and conditions remain the same.

Please adjust your records accordingly.

New York State Office Of General Services
 Procurement Services Group
 Corning Tower Building
 Empire State Plaza
 Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: August 14, 2006

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
 Purchasing Officer I
 (518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

OTHER AUTHORIZED USERS

Customer Services
 (518) 474-6717
customer.services@ogs.state.ny.us

CONTRACTOR: GlaxoSmithKline

CONTRACT NO.: PC59777

SUBJECT: PRICE LIST UPDATE REVISION

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

This is a correction to the listed price for Pediatric Havrix Vials. The Contract Price per Pack with FET added should have read \$61.25 instead of \$65.00. The corrected price is highlighted in the table below. All other prices remain unchanged.

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Adult Vaccines						
Havrix Tip-Lok 1440 EL.U./mL - NN (10)	10	58160-835-11	\$18.58	\$185.80	\$19.33	\$193.30
Havrix Tip-Loks 1440 EL.U./mL- NN (5)	5	58160-835-46	\$18.58	\$92.90	\$19.33	\$96.65
Twinrix Vials 1 Dose/1mL (10)	10	58160-850-11	\$37.07	\$377.00	\$38.57	\$385.70
Twinrix Tip-Loks 1 Dose/1mL-NN (5)	5	58160-850-46	\$37.07	\$188.50	\$38.57	\$192.85
Engerix-B PF Vial 20 Mcg/mL-NN	10	58160-857-11	\$25.35	\$253.50	\$24.60	\$240.00
Engerix-B PF Tip-Loks 20 Mcg/mL-NN (5)	5	58160-857-46	\$25.35	\$126.75	\$24.60	\$123.00

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Pediatrics Vaccines						
Havrix Vials 720 EL.U./0.5mL (10)	10	58160-837-11	\$11.50	\$115.00	\$12.25	\$122.50
Havrix Vials 720 EL.U./0.5mL (5)	5	58160-837-46	\$11.50	\$57.50	\$12.25	\$61.25
Infanrix Vials 1 Dose/0.5mL (10)	10	58160-840-11	\$11.00	\$110.00	\$13.25	\$132.50
Infanrix Tip-Loks 0.5mL -NN (5)	5	58160-840-46	\$11.00	\$55.00	\$13.25	\$66.25
Engerix-B PF Vials 10 Mcg/0.5mL (10)	10	58160-856-11	\$8.35	\$83.50	\$9.10	\$91.00
Engerix-B PF Tip-Loks 10 Mcg/0.5mL-NN (5)	5	58160-856-46	\$8.35	\$41.75	\$9.10	\$45.50
Boostrix 0.5mL Single Dose Vials (10)	10	58160-842-11	\$28.50	\$285.00	\$30.75	\$307.50
Boostrix 0.5mL Single Dose Vials (5)	5	58160-842-46	\$28.50	\$142.50	\$30.75	\$153.75
Pediarix Single Dose Vials(10)	10	58160-841-11	\$40.00	\$400.00	\$43.75	\$437.50
Pediarix Tip-Loks NN (5)	5	58160-841-46	\$40.00	\$200.00	\$43.75	\$218.75

All other terms and conditions remain the same.

Please adjust your records accordingly.

New York State Office Of General Services
 Procurement Services Group
 Corning Tower Building
 Empire State Plaza
 Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: August 2, 2006

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
 Purchasing Officer I
 (518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

OTHER AUTHORIZED USERS

Customer Services
 (518) 474-6717
customer.services@ogs.state.ny.us

CONTRACTOR: GlaxoSmithKline
CONTRACT NO.: PC59777

SUBJECT: PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

Effective July 1, 2006, the contract has been updated to reflect price increases for the Adult Vaccines. The shaded rows below indicate the updated pricing. The prices for the Pediatric Vaccines shall remain unchanged.

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Adult Vaccines						
Havrix Tip-Lok 1440 EL.U./mL - NN (10)	10	58160-835-11	\$18.58	\$185.80	\$19.33	\$193.30
Havrix Tip-Loks 1440 EL.U./mL- NN (5)	5	58160-835-46	\$18.58	\$92.90	\$19.33	\$96.65
Twinrix Vials 1 Dose/1mL (10)	10	58160-850-11	\$37.07	\$377.00	\$38.57	\$385.70
Twinrix Tip-Loks 1 Dose/1mL-NN (5)	5	58160-850-46	\$37.07	\$188.50	\$38.57	\$192.85
Engerix-B PF Vial 20 Mcg/mL-NN	10	58160-857-11	\$25.35	\$253.50	\$24.60	\$240.00
Engerix-B PF Tip-Loks 20 Mcg/mL-NN (5)	5	58160-857-46	\$25.35	\$126.75	\$24.60	\$123.00

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Pack With FET
Pediatrics Vaccines						
Havrix Vials 720 EL.U./0.5mL (10)	10	58160-837-11	\$11.50	\$115.00	\$12.25	\$122.50
Havrix Vials 720 EL.U./0.5mL (5)	5	58160-837-46	\$11.50	\$57.50	\$12.25	\$65.00
Infanrix Vials 1 Dose/0.5mL (10)	10	58160-840-11	\$11.00	\$110.00	\$13.25	\$132.50
Infanrix Tip-Loks 0.5mL -NN (5)	5	58160-840-46	\$11.00	\$55.00	\$13.25	\$66.25
Engerix-B PF Vials 10 Mcg/0.5mL (10)	10	58160-856-11	\$8.35	\$83.50	\$9.10	\$91.00
Engerix-B PF Tip-Loks 10 Mcg/0.5mL-NN (5)	5	58160-856-46	\$8.35	\$41.75	\$9.10	\$45.50
Boostrix 0.5mL Single Dose Vials (10)	10	58160-842-11	\$28.50	\$285.00	\$30.75	\$307.50
Boostrix 0.5mL Single Dose Vials (5)	5	58160-842-46	\$28.50	\$142.50	\$30.75	\$153.75
Pediarix Single Dose Vials(10)	10	58160-841-11	\$40.00	\$400.00	\$43.75	\$437.50
Pediarix Tip-Loks NN (5)	5	58160-841-46	\$40.00	\$200.00	\$43.75	\$218.75

All other terms and conditions remain the same.

Please adjust your records accordingly.

New York State Office Of General Services
 Procurement Services Group
 Corning Tower Building
 Empire State Plaza
 Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: June 21, 2006

GROUP: 10200 – Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:

STATE AGENCIES & CONTRACTORS

Jason D. Wilkie
 Purchasing Officer I
 (518) 474-4723
jason.wilkie@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

OTHER AUTHORIZED USERS

Customer Services
 (518) 474-6717
customer.services@ogs.state.ny.us

CONTRACTOR: GlaxoSmithKline

CONTRACT NO.: PC59777

SUBJECT: GROUP NUMBER REVISION/PRICE LIST UPDATE

TO ALL STATE AGENCIES AND OTHERS AUTHORIZED TO USE STATE CONTRACTS:

The contract has been updated to reflect the change in Group Number from 10217 to the new Group Number 10200.

GlaxoSmithKline has offered, and we have accepted, prices to reflect their new contract prices effective June 3, 2006 as follows

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Dose With FET
Adult Vaccines						
Havrix Tip-Lok 1440 EL.U./mL - NN (1)	10	58160-835-11	\$17.75	\$177.50	\$18.50	\$185.00
Havrix Tip-Loks 1440 EL.U./mL- NN (5)	5	58160-835-46	\$17.75	\$88.75	\$18.50	\$92.50
Twinrix Vials 1 Dose/1mL (10)	10	58160-850-11	\$35.41	\$354.10	\$36.91	\$369.10
Twinrix Tip-Loks 1 Dose/1mL-NN (5)	5	58160-850-46	\$35.41	\$177.05	\$36.91	\$184.55
Engerix-B PF Vial 20 Mcg/mL-NN	10	58160-857-11	\$23.50	\$235.00	\$24.25	\$242.50
Engerix-B PF Tip-Loks 20 Mcg/mL-NN (5)	5	58160-857-46	\$23.50	\$117.50	\$24.25	\$121.25

Vaccine Description	Units	N.D.C.	Contract Price Per Dose	Contract Price Per Pack	Contract Price Per Dose with FET	Contract Price Per Dose With FET
Pediatrics Vaccines						
Havrix Vials 720 EL.U./0.5mL (10)	10	58160-837-11	\$11.50	\$115.00	\$12.25	\$122.50
Havrix Vials 720 EL.U./0.5mL (5)	5	58160-837-46	\$11.50	\$57.50	\$12.25	\$65.00
Infanrix Vials 1 Dose/0.5mL (10)	10	58160-840-11	\$11.00	\$110.00	\$13.25	\$132.50
Infanrix Tip-Loks 0.5mL -NN (5)	5	58160-840-46	\$11.00	\$55.00	\$13.25	\$66.25
Engerix-B PF Vials 10 Mcg/0.5mL (10)	10	58160-856-11	\$8.35	\$83.50	\$9.10	\$91.00
Engerix-B PF Tip-Loks 10 Mcg/0.5mL-NN (5)	5	58160-856-46	\$8.35	\$41.75	\$9.10	\$45.50
Boostrix 0.5mL Single Dose Vials (10)	10	58160-842-11	\$28.50	\$285.00	\$30.75	\$307.50
Boostrix 0.5mL Single Dose Vials (5)	5	58160-842-46	\$28.50	\$142.50	\$30.75	\$153.75
Pediarix Single Dose Vials(10)	10	58160-841-11	\$40.00	\$400.00	\$43.75	\$437.50
Pediarix Tip-Loks NN (5)	5	58160-841-46	\$40.00	\$200.00	\$43.75	\$218.75

All other terms and conditions remain the same.

Please adjust your records accordingly.

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: May 31, 2005

GROUP: 10217 - Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

Donna M. McNeil
Purchasing Officer I
(518) 474-0912
donna.mcneil@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: GlaxoSmithKline
CONTRACT NO.: PC59777

SUBJECT: PRICE LIST UPDATE

TO NEW YORK STATE DEPARTMENT OF HEALTH:

GlaxoSmithKline has offered, and we have accepted, prices to reflect their new contract prices effective May 26, 2005 as follows:

NDC	TRADE DESCRIPTION	PACKAG ING	CONTRACT PRICE
58160-857-46	Engerix-B PF Tip-Loks 20 Mcg/mL-NN (5)	5	\$117.50
58160-857-50	Engerix-B PF Tip-Loks 20 Mcg/mL-NN (25)	25	\$587.50
58160-857-01	Engerix-B PF Vial 20 Mcg/mL (1) Footnote #1	1	\$ 23.50
58160-857-16	Engerix-B PF Vials 20 Mcg/mL (25)	25	\$587.50
58160-856-01	Engerix-B PF Vial 10 Mcg/0.5mL	1	\$ 8.25
58160-856-11	Engerix-B PF Vials 10 Mcg/0.5mL (10)	10	\$ 82.50
58160-856-50	Engerix-B PF Tip-Loks 10 Mcg/0.5mL-NN (25)	25	\$206.25
58160-856-46	Engerix-B PF Tip-Loks 10 Mcg/0.5mL-NN (5)	5	\$ 41.25
58160-856-57	Engerix-B PF Safety Tip-Loks 10Mcg/0.5mL (25)	25	\$206.25
58160-835-41	Havrix Tip-Lok 1440 EL.U./mL-NN (1)	1	\$ 17.75
58160-835-46	Havrix Tip-Loks 1440 EL.U./mL-NN (5)	5	\$ 88.75
58160-835-01	Havrix Vial 1440 EL.U./mL (1) Footnote #1	1	\$ 17.75

(continued)

NDC	TRADE DESCRIPTION	PACKAGING	CONTRACT PRICE
58160-837-01	Havrix Vial 720 EL.U./0.5mL	1	\$ 11.50
58160-837-11	Havrix Vials 720 EL.U./0.5mL (10)	10	\$115.00
58160-837-50	Havrix Tip-Loks 720 EL.U./0.5mL-NN (25)	25	\$287.50
58160-837-46	Havrix Tip-Loks 720 EL.U./0.5mL-NN (5)	5	\$ 57.50
58160-840-11	Infanrix Vials 1 Dose/0.5mL (10)	10	\$105.00
58160-840-46	Infanrix Tip-Loks 0.5mL-NN (5)	5	\$ 52.50
58160-841-11	Pediarix Single Dose Vials (10)	10	\$345.90
58160-841-46	Pediarix Tip-Loks NN (5)	5	172.95
58160-850-46	Twinrix Tip-Loks 1 Dose/1mL-NN (5)	5	\$177.05
58160-850-01	Twinrix Vial 1 Dose/1mL (1)	1	\$35.41
58160-850-11	Twinrix Vials 1 Dose/1mL (10)	10	\$354.10

Please note that the prices for **Engerix B**, **Havrix** and **Twinrix** vaccines do not include the Federal Excise Tax of \$0.75 per antigen, per dose.

New York State Office Of General Services
Procurement Services Group
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Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: May 13, 2005

GROUP: 10217 – Vaccines, New York State
Dept. of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

Donna M. McNeil
Purchasing Officer I
(518) 474-0912
donna.mcneil@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 through
October 31, 2007

CONTRACTOR: Sanofi Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: NAME CHANGE/UPDATED PRICE LIST

TO THE NEW YORK STATE DEPARTMENT OF HEALTH:

Aventis Pasteur Inc. has changed its corporate name to **Sanofi Pasteur, Inc.** This is a change of corporate name only. The FID# has not changed. These revisions are effective May 1, 2005.

Updated Price List:

Effective from 5/1/05 – 04/30/06

<u>NDC No.</u>	<u>Item</u>	<u>Pkg.</u>	<u>Contract Price</u>
49281-0860-10	IPOL POLIOMYELITIS VAC. 10 DOSE VIAL	200 PAC	\$217.96 (incl. \$7.50 FET)
49281-0545-05	ACTHIB HAEMOPH B POLYSAC CONJ-TET TOX VIAL 5 X 1 DOSE	160 PAC	\$108.91 (incl. \$3.75 FET)
49281-0298-10	TRIPEDIA DIPHTH, PERTUSS (ACELL), TET PED 6.7-46.8-5 VIAL	10 X 1	\$213.95(incl. \$22.50 FET)
49281-0880-01	THERACYS BCG VACCINE 81 MG VIAL 1 DOSE VIAL/DILUENT	1EA X 1	\$153.20
49281-0680-30	JE VAC JAPANESE ENCEPHALITIS VACCINE VIAL 3 X 1 DOSE W/DILUENT	3EA X 1	\$264.38
49281-0489-05	MENOMUNE MENINGOCOCCAL VAC A,C,Y,W-135 VIAL 5 X 1 DOSE	5EA X 1	\$430.50
49281-0489-01	MENOMUNE MENINGOCOCCAL VAC A,C,Y,W-135 VIAL 1 DOSE	1EA X 1	\$86.10
49281-0812-84	TETANUS TOXOID PL 7.5 ML	1 PAC	\$266.25 (incl. \$11.25 FET)

Updated Price List: (Cont'd)
Effective from 5/1/05 – 04/30/06

49281-0800-83	TETANUS TOXOID, ADSORBED 5LFU/0.5ML VIAL	5ML X 1	\$177.50 (incl. \$7.50 FET)
49281-0190-20	IMOGAM RABIES IMMUNE GLOBULIN 150U/ML VIAL	2ML X 1	\$131.55
49281-0190-10	IMOGAM RABIES IMMUNE GLOBULIN 150U/ML VIAL	10ML X 1	\$657.76
49281-0250-10	IMOVAX RABIES VACCINE, HUMAN DIPLOID 1ML VIAL	1EAX1	\$123.81
49281-0597-05	TRIHIBIT 5X1 DOSE PR FREE	5 X 1	\$208.62 (incl. \$15.00 FET)
49281-0790-20	TYPHOID VACC VI CAPSU POLYSACC 25MCG/.5ML VIAL 20 DOSE	1 PAC	\$750.37
49281-0915-01	YELLOW FEVER VACCINE VIAL	1EA X 5	\$330.33
49281-0915-05	YELLOW FEVER VACCINE VIAL 5 DOSE	1 PAC	\$264.27
49281-0752-21	TUBERSOL TUBERCULIN, PURIF. PROT. DERIV. 5TU X 10	1 PAC	\$22.75
49281-0752-22	TUBERSOL TUBERCULIN, PURIF. PROT. DERIV. 5TU X 50	1 PAC	\$82.81

ADDITIONS:

49281-0278-10	DIPH/TET Ad, 10x1	1 PAC	\$175.00 (incl. \$15.00 FET)
49281-0286-10	DAPTACEL, 10x1 DS VLS	1 PAC	\$220.40 (incl. \$22.50 FET)
49281-0291-10	DECAVAC, 10x1, UD SYR	1 PAC	\$175.00 (incl. \$15.00 FET)
49281-0790-51	TYPHIM-Vi, 1DS SYR	1 PAC	\$41.69
49281-0589-01	MENACTRA, 1 DS VL	1 PAC	\$82.00
49281-0589-05	MENACTRA, 5 Single DS VL	1 PAC	\$410.00
49281-0376-15	FLUZONE , 10DS VL	1 PAC	\$96.52
49281-005-50	FLUZONE, 10 PK SYR	1 PAC	\$129.85
49281-005-25	FLUZONE, 10 PK SYR – Pediatric	1 PAC	\$120.05

We suggest you attach this purchasing memorandum to the front of your contract award.

All contract terms and conditions remain the same.

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: March 3, 2005

GROUP: 10217 - Vaccine, New York State
Dept. of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

Donna M. McNeil
Purchasing Officer
(518) 474-0912
donna.mcneil@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: GlaxoSmithKline
CONTRACT NO.: PC59777

SUBJECT: Contact Update

TO NEW YORK STATE DEPARTMENT OF HEALTH:

The new contact for the above contract is:

Babatunde Adedeji
800/366-8900 Ext 6789
215-751-6789
Fax: 215-751-4479
email: Babatunde.A.Adedeji@gsk.com
website: www.gsk.com

New York State Office Of General Services
 Procurement Services Group
 Corning Tower Building
 Empire State Plaza
 Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: February 22, 2005

GROUP: 10217 - Vaccines, New York State Dept.
Of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

Donna M. McNeil
Purchasing Officer
(518) 474-0912
donna.mcneil@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: GlaxoSmithKline
CONTRACT NO.: PC59777

SUBJECT: Price List Update

TO NEW YORK STATE DEPARTMENT OF HEALTH:

GlaxoSmithKline has offered, and we have accepted, prices to reflect their new contract prices effective January 27, 2005 as follows:

NDC	TRADE DESCRIPTION	PACKAGING	CONTRACT PRICE
00173-0672-00	AGENERASE	240EA X 1	\$308.64**
00029-6075-27	AUGMENTIN	30EA X 1	\$71.32
00029-6080-12	AUGMENTIN	20EA X 1	\$69.97
00029-6086-12	AUGMENTIN	20EA X 1	\$93.40
00029-6096-48	AUGMENTIN XR TABLETS SCORED 100MG	28EA X 1	\$65.38
00029-6096-60	AUGMENTIN XR TABLETS SCORED 100MG 40S	40EA X1	\$93.40
00029-3159-20	AVANDIA 4MG TABLET	100EA X 1	\$241.91
00007-3163-18	AVANDAMET TABS 2MG/1000MG 60'S BTL	60EA X 1	\$112.32
00007-3164-18	AVANDAMET TABS 4MG/1000MG 60'S BTL	60EA X 1	\$168.48
00173-0712-15	AVODART CPSL 0.5MG	30EA X 1	\$65.52
00029-1525-44	BACTROBAN 2% OINTMENT	22GM X 1	\$38.00
00173-0595-00	COMBIVIR TABLET	60EA X 1	\$602.11**
00173-0595-02	COMBIVIR TABLET	UD120EA X 1	\$1,204.23**
00007-4141-20	COREG CO OR TABS 12.5MG BO 100	100EA X 1	\$148.31
00007-4142-20	COREG CO OR TABS 25MG BO 100	100EA X 1	\$148.31
00007-4139-20	COREG CO OR TABS 3.125MG BO 100	100EA X 1	\$148.31

00007-4140-20	COREG CO OR TABS 6.25MG BO 100	100EA X 1	\$148.31
00173-0201-55	DARAPRIM 25MG TABLET	100EA X 1	\$48.47
58160-0857-46	ENGERIX-B TIP-LOKS 20MCG/ML	1ML X 5	\$117.50
58160-0857-50	ENGERIX-B TIP-LOKS 20MCG/ML	1ML X 25	\$587.50
58160-0857-01	ENGERIX-B 20MCG/ML VIAL	1ML X 1	\$23.50
58160-0857-16	ENGERIX-B 20 MCG/ML VIAL	1ML X 25	\$587.50
00173-0714-00	EPIVIR 300MG TABLET	30EA X 1	\$277.69**
00173-0470-01	EPIVIR 150MG TABLET	30EA X 1	\$277.69**
00007-4010-20	ESKALITH CR 450MG TABLET SA	100EA X 1	\$47.73
00173-0453-01	FLONASE 0.05% NASAL SPRAY	16GM X 1	\$54.61
00173-0495-00	FLOVENT 220MCG INHALER	13GM X 1	\$105.76
58160-0835-41	HAVRIX TIP - LOK 1440U/ML	1ML X 1	\$17.75
58160-0835-46	HAVRIX TIP - LOKS 1440U/ML	1ML X 5	\$88.75
58160-0835-01	HAVRIX 1440U/ML VIAL	1ML X 1	\$17.75
00173-0460-02	IMITREX 25MG TABLET	9EA X 1	\$144.52
00173-0459-00	IMITREX 50MG TABLET	9EA X 1	\$128.60
00173-0547-00	MEPRON 750MG/ML SUSPENSION	UD5ML X 42	\$618.11**
00029-3211-20	PAXIL 20MG TABLET	100EA X 1	\$243.21
00173-0108-55	RETROVIR 100MG CAPSULE	100EA X 1	\$180.25**
00173-0501-00	RETROVIR 300MG TABLET	60EA X 1	\$324.47**
00173-0464-00	SEREVENT 21MCG INHALER	13GM X 1	\$73.51
00173-0520-00	SEREVENT DISKUS INH PWDER	28EA X 1	\$47.85
00173-0521-00	SEREVENT DISKUS 50 mcg INH PWDER	60EA x 1	\$77.19
00173-0691-00	TRIZIVIR TABLET	60EA X 1	\$975.26**
58160-0850-46	TWINRIX TIP - LOKS 1 DOSE/1ML	1ML X 5	\$177.05
58160-0850-01	TWINRIX VIAL 1 DOSE/1ML	1ML X 1	\$35.41
58160-0850-11	TWINRIX VIAL 1 DOSE/1ML	1ML X 10	\$354.10
00173-0947-55	WELLBUTRIN SR 100MG TAB SA	60EA X 1	\$96.39
00173-0135-55	WELLBUTRIN SR 150MG TAB SA	60EA X 1	\$103.31
00173-0730-01	WELLBUTRIN XL TAB 150MG	30EA X 1	\$73.35
00173-0731-01	WELLBUTRIN XL TAB 300MG	30EA X 1	\$96.82
00173-0661-01	ZIAGEN 300MG	60EA X 1	\$373.15**

Please note that the prices for **Engerix B**, **Havrix** and **Twinrix** vaccines do not include the Federal Excise Tax of \$0.75 per antigen, per dose.

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: June 25, 2004

GROUP: 10217 - Vaccines, New York State Dept.
of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

James A. Gelston
Purchasing Officer I
(518) 474-6705
james.gelston@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: Aventis Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: Price Revisions, New Products and Ship-to Location

TO NEW YORK STATE DEPT. OF HEALTH:

We refer to Group 10217, Award No. C-02542, our contract award for vaccine products for N.Y. State Dept. of Health. Specifically, Contract No. PC59776, Aventis Pasteur, Inc. The contractor has offered, and we have accepted, updated products and prices reflecting current CDC or MMCAP contracts. In addition, our price clause has been revised to show address of our new vaccine distribution contractor, General Injectables and Vaccines (GIV) as follows:

PRICE:

Price includes all customs duties and charges and is net, F.O.B. destination, NY State Dept. of Health Wadsworth Laboratories, Empire State Plaza, P3 Loading Dock J3, Albany, NY 12242 or General Injectables & Vaccines (GIV), 21-52 Terrace Hill, Bastian, VA 23414.

Federal (CDC) Contract Period 4/1/04 - 3/31/05

<u>NDC No.</u>	<u>Item</u>	<u>Pkg.</u>	<u>Contract Price</u>
49281-0597-05	TRIHIBIT 5 X 1 DOSE	10 PAC	\$117.00 (incl. \$15.00 FET)
49281-0860-10	IPOL POLIOMYELITIS VAC. 10 DOSE VIAL	100 PAC	\$101.40 (incl. \$7.50 FET)
49281-0545-05	ACTHIB HAEMOPH B POLYSAC CONJ-TET TOX VIAL 5 X 1 DOSE	160 PAC	\$34.40 (incl. \$3.75 FET)
49281-0298-10	TRIPEDIA DIPHTH, PERTUSS (ACELL), TET PED 6.7-46.8-5 VIAL	10 X 1	\$117.50 (incl. \$22.50 FET)
49281-0286-10	DAPT A CEL DIPHTH, PERTUSS (ACELL), TET PED 10 X 1 DOSE VIAL	10 PAC	\$127.50 (incl. \$22.50 FET)

MN Multistate Contract Period 5/1/04 - 4/30/05

<u>NDC No.</u>	<u>Item</u>	<u>Pkg.</u>	<u>Contract Price</u>
49281-0880-01	THERACYS BCG VACCINE 81 MG VIAL 1 DOSE VIAL/DILUENT	1EA X 1	\$153.20
49281-0680-20	JE VAC JAPANESE ENCEPHALITIS VACCINE VIAL 10 DOSE W/DILUENT	1EA X 1	\$691.85
49281-0680-30	JE VAC JAPANESE ENCEPHALITIS VACCINE VIAL 3 X 1 DOSE W/DILUENT	3EA X 1	\$258.68
49281-0489-05	MENOMUNE MENINGOCOCCAL VAC A,C,Y,W-135 VIAL 5 X 1 DOSE	5EA X 1	\$315.84
49281-0489-01	MENOMUNE MENINGOCOCCAL VAC A,C,Y,W-135 VIAL 1 DOSE	1EA X 1	\$69.73
49281-0489-91	MENOMUNE A,C,Y,W-135 10 DOSE	1 PAC	\$579.68
49281-0812-84	TETANUS TOXOID PL 7.5 ML	1 PAC	\$209.63 (incl. \$11.25 FET)
49281-0271-83	TETANUS/DIPHTH AD 5ML (ADULT)	1 PAC	\$105.10 (incl. \$15.00 FET)
49281-0800-83	TETANUS TOXOID, ADSORBED 5LFU/0.5ML VIAL	5ML X 1	\$139.75 (incl. \$7.50 FET)
49281-0278-10	DIPH/TET, AD 10 X 1 PRES. FREE, PEDIATRIC	1 PAC	\$135.00 (incl. \$15.00 FET)
49281-0190-20	IMOGAM RABIES IMMUNE GLOBULIN 150U/ML VIAL	2ML X 1	\$127.72
49281-0190-01	IMOGAM RABIES IMMUNE GLOBULIN 150U/ML VIAL	10ML X 1	\$638.60
49281-0250-10	IMOVAX RABIES VACCINE, HUMAN DIPLOID 1ML VIAL	1EAX1	\$109.18
49281-0597-05	TRIHIBIT 5X1 DOSE PR FREE	5 X 1	\$208.62 (incl. \$15.00 FET)
49281-0790-01	TYPHOID VACC VI CAPSU POLYSACC 25MCG/.5ML DISP SYRIN 1 DOSE	.5ML X 1	\$40.47
49281-0790-20	TYPHOID VACC VI CAPSU POLYSACC 25MCG/.5ML VIAL 20 DOSE	1 PAC	\$728.52
49281-0915-01	YELLOW FEVER VACCINE VIAL	1EA X 5	\$320.71
49281-0915-05	YELLOW FEVER VACCINE VIAL 5 DOSE	1 PAC	\$256.57
49281-0752-21	TUBERSOL TUBERCULIN, PURIF. PROT. DERIV. 5TU X 10	1 PAC	\$22.75
49281-0752-22	TUBERSOL TUBERCULIN, PURIF. PROT. DERIV. 5TU X 50	1 PAC	\$82.81
49281-0680-10	DAPTACEL 10 X 1 DOSE VIALS	1 PAC	\$220.40 (incl. \$22.50 FET)
00000-0373-25	FLUZONE SV 04-05 5 X 2 XUD SYR PED (6-35 MO.)	1 PAC	\$117.60
49281-0374-11	FLUZONE SV 04-05 5 X 2 XUD SYR	1 PAC	\$111.40
49281-0374-15	FLUZONE SV 04-05 10 DOSE VIAL	1 PAC	\$83.20

These revisions are effective for contract periods indicated herein for CDC and MMCAP contracts. All contract terms and conditions remain unchanged. We suggest you attach this Purchasing Memorandum to the front of your contract award. Should you have any questions, please call this office at 518/474-6705 or e-mail james.gelston@ogs.state.ny.us.

New York State Office Of General Services
Procurement Services Group
Corning Tower Building
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

PURCHASING MEMORANDUM

CONTRACT AWARD NOTIFICATION UPDATE

AWARD NUMBER: [C-02542](#)

DATE: April 4, 2003

GROUP: 10217 - Vaccines, New York State
Dept. of Health Immunization Program

PLEASE ADDRESS INQUIRIES TO:
STATE AGENCIES & CONTRACTORS

James Gelston
Purchasing Officer I
(518) 474-6705
james.gelston@ogs.state.ny.us

CONTRACT PERIOD: November 1, 2002 -
October 31, 2007

CONTRACTOR: Aventis Pasteur, Inc.
CONTRACT NO.: PC59776

SUBJECT: CDC Contract Ordering

TO NEW YORK STATE DEPARTMENT OF HEALTH:

We refer to Contract Award Number C-02542, our Vaccine Products Contract for New York State Dept. of Health Immunization Program. Specifically, Contract No. PC59776, Aventis Pasteur, Inc.

Although Aventis Pasteur holds a New York State Contract for vaccine products, orders for products eligible for CDC pricing must be processed through the CDC. Orders are to be entered electronically into the VACMAN System. Upon CDC approval, requirement is then forwarded to Aventis Pasteur for shipment to the designated Dept. of Health Vaccine Distribution Depot.

Should you have any questions concerning CDC ordering, please feel free to call Tami Binder of Aventis Pasteur at 570/839-4445. You may also call this office at 518/474-6705 or e-mail james.gelston@ogs.state.ny.us.

We suggest you attach this purchasing memorandum to the front of your contract award.

State of New York Executive Department
Office Of General Services
Procurement Services Group
Corning Tower Building - 38th Floor
Empire State Plaza
Albany, New York 12242
<http://www.ogs.state.ny.us>

CONTRACT AWARD NOTIFICATION

Title	:	Group 10217 - Vaccines, New York State Dept. of Health Immunization Program Classification Code(s): 51
Award Number	:	C-02542
Contract Period	:	November 1, 2002 through October 31, 2007 (see note: contract term, page 9)
Bid Opening Date	:	July 12, 2002
Date of Issue	:	December 16, 2002
Specification Reference	:	As Incorporated In The Request for Quotation
Contractor Information	:	Appears on Page 2 of this Award

Address Inquiries To:

State Agencies & Vendors

Name : James A. Gelston
Title : Purchasing Officer I
Phone : 518-474-6705
Fax : 518-474-1563
E-mail : james.gelston@ogs.state.ny.us

**The Procurement Services Group values your input.
Complete and return "Contract Performance Report" at end of document.**

Description

Vaccine products for N.Y. State Dept. of Health Immunization Bureau.

PR # 02542

(continued)

NOTE: See individual contract items to determine actual awardees.

<u>CONTRACT #</u>	<u>CONTRACTOR & ADDRESS</u>	<u>TELEPHONE #</u>	<u>FED.IDENT.#</u>
PC59776	AVENTIS PASTEUR, INC. Discovery Drive Swiftwater, PA 18370	800-822-2463 570-839-4445 Tami M. Binder Fax: 800-561-1216 570-839-0940 E-mail: tami.binder@aventis.com Website: www.aventis.com 800/366-8900	980033013
PC59777	SMITHKLINE BEECHAM CORP. d/b/a Glaxo SmithKline Three Franklin Plaza P.O. Box 13619 Philadelphia, PA 19101	800/366-8900 215-751-7264 Kathleen Dynan Black Fax: 215-751-3063 e-mail: Kathleen.d.black@gsk.com Wanda.l.velazquez@gsk.com	231099050

Cash Discount, If Shown, Should be Given Special Attention.

INVOICES MUST BE SENT DIRECTLY TO THE ORDERING AGENCY FOR PAYMENT.

(See "Contract Payments" and "Electronic Payments" in this document.)

AGENCIES SHOULD NOTIFY THE PROCUREMENT SERVICES GROUP PROMPTLY IF THE CONTRACTOR FAILS TO MEET DELIVERY OR OTHER TERMS OF THIS CONTRACT. PRODUCTS OR SERVICES WHICH DO NOT COMPLY WITH THE SPECIFICATIONS OR ARE OTHERWISE UNSATISFACTORY TO THE AGENCY SHOULD ALSO BE REPORTED TO THE PROCUREMENT SERVICES GROUP.

SMALL, MINORITY AND WOMEN-OWNED BUSINESSES:

The letters **SB** listed under the Contract Number indicate the contractor is a NYS small business. Additionally, the letters **MBE** and **WBE** indicate the contractor is a Minority-owned Business Enterprise and/or Woman-owned Business Enterprise.

RECYCLED, REMANUFACTURED AND ENERGY EFFICIENT PRODUCTS:

The Procurement Services Group supports and encourages the purchase of recycled, remanufactured, energy efficient and "energy star" products. If one of the following codes appears as a suffix in the Award Number or is noted under the individual Contract Number(s) in this Contract Award Notification, please look at the individual awarded items for more information on products meeting the suffix description.

RS,RP,RA	Recycled
RM	Remanufactured
SW	Solid Waste Impact
EE	Energy Efficient
E*	EPA Energy Star
ES	Environmentally Sensitive

NOTE TO ALL CONTRACT USERS:

The terms and conditions of the bid solicitation which apply to the award appear at the end of this document. We strongly advise all contract users to familiarize themselves with all terms and conditions before issuing a purchase order.

(continued)

PRICE:

Price includes all customs duties and charges and is net, F.O.B. destination, NY State Dept. of Health Wadsworth Laboratories, Empire State Plaza, P3 Loading Dock J3, Albany, NY 12242 or Bellco Drug Corp., 3500 New Horizons Blvd., N. Amityville, NY 11701 as indicated on purchase order.

PRODUCT LINE: AVENTIS PASTEUR

<u>NDC No.</u>	<u>Item</u>	<u>Size & Strength</u>	<u>Contract Price</u>
<u>Federal (CDC) Contract Period 4/1/02 - 3/31/03</u>			
49281-0597-05	DP(A)T PED/HIB CONJ-TET KIT	5EA x 1	\$117.00 (incl. \$15.00 FET)
49281-0860-10	IPOL POLIOMYELITIS VAC, KILLED VIAL	5ML x 1	\$88.00 (incl. \$7.50 FET)
49281-0860-52	IPOL POLIOMYELITIS VAC, KILLED DISP SYRIN	0.5ML x 10	\$88.00 (incl. \$7.50 FET)
49281-0545-05	ACTHIB HAEMOPH B POLYSAC CONJ-TET TOX VIAL	5EA x 1	\$36.25 (incl. \$3.75 FET)
49281-0298-10	TRIPEDIA DIPHTH, PERTUSS (ACELL), TET PED 6.7-46.8-5 VIAL	.5ML x 10	\$132.50 (incl. \$22.50 FET)
49281-0286-05	DAPYA CEL DIPHTH, PERTUSS (ACELL), TET PED 15-10-5 VIAL	2.5ML x 5	\$71.25 (incl. \$11.25 FET)
<u>MN Multistate Contract Period 5/1/01 - 4/30/03</u>			
49281-0880-01	THERACYS BCG VACCINE 81MG VIAL	1EA x 1	\$144.41
49281-0680-20	JE VAC JAPANESE ENCEPHALITIS VACCINE VIAL 10 DOSE W/DILUENT	1EA x 1	\$652.14
49281-0680-30	JE VAC JAPANESE ENCEPHALITIS VACCINE VIAL 321 DOSE W/DILUENT	3EA x 1	\$241.95
49281-0489-05	MENOMUNE MENINGOCOCCAL VAC A,C,Y,W-135 VIAL	5EA x 1	\$292.44
49281-0489-01	MENOMUNE MENINGOCOCCAL VAC A,C,Y,W-135 VIAL	1EA x 1	\$64.27
49281-0812-84	TETANUS TOXOID PL 7.5ML	1PAC	\$107.37 (incl. \$11.25FET)
49281-0271-10	TETANUS/DIPHTH AD 10X1 UD SYR	1 PAC	\$93.39 (incl. \$15.00FET)
49281-0190-20	IMOGAM RABIES IMMUNE GLOBULIN 150U/ML VIAL	2ML x 1	\$127.72
49281-0190-01	IMOGAM RABIES IMMUNE GLOBULIN 150U/ML VIAL	10ML x 1	\$638.60

(continued)

PRODUCT LINE: AVENTIS PASTEUR (con't)

<u>NDC No.</u>	<u>Item</u>	<u>Size & Strength</u>	<u>Contract Price</u>
49281-0271-83	TETANUS, DIPHTHERIA TOXOID 5-2LFU VIAL	5ML x 1	\$77.80 (incl. \$15.00 FET)
49281-0275-10	TETANUS, DIPHTHERIA TOXOID PED 5-6.6LFU VIAL	5ML x 1	\$77.80 (incl. \$15.00 FET)
49281-0790-01	TYPHOID VACC VI CAPSU POLYSACC 25MCG/.5ML DISP SYRIN	.5ML x 1	\$38.15
49281-0790-20	TYPHOID VACC VI CAPSU POLYSACC 25MCG/.5ML VIAL	10ML x 1	\$686.70
49281-0915-01	YELLOW FEVER VACCINE VIAL	1EA x 5	\$302.30
49281-0915-05	YELLOW FEVER VACCINE VIAL	1EA x 1	\$241.84
49281-0250-10	IMOVAX RABIES VACCINE, HUMAN DIPLOID 2.5U VIAL	1EA x 1	\$109.18
49281-0800-83	TETANUS TOXOID, ADSORBED 5LFU/0.5ML VIAL	5ML x 1	\$71.58 (incl. \$7.50 FET)
49281-0752-21	TUBERSOL TUBERCULIN, PURIF. PROT. DERIV. 5TU/0.1ML VIAL	1ML x 1	\$17.61
49281-0752-22	TUBERSOL TUBERCULIN, PURIF. PROT. DERIV. 5TU/0.1ML VIAL	5ML x 1	\$57.81
49281-0240-10	MUMPS SKIN TEST ANTIGEN 10 TEST VIAL	1EA x 1	\$110.63
49281-0286-05	DAPTACEL VACCINE	2.5ML x 5	\$79.95 (incl. \$11.25 FET)

Manufacturer: Aventis Pasteur, Inc.

Guaranteed Delivery: 4 Days A/R/O

Note: Some products, depending on order size and product availability are subject to split shipments.

Contractor has catalog available on the internet website www.vaccineshoppe.com and offers Electronic Access Ordering (EDI).

Contractor accepts the New York State Procurement Card for orders up to \$2,500.00. No further discounts are applied for using the New York State Procurement Card.

(continued)

PRODUCT LINE: GLAXO SMITHKLINE

<u>NDC No.</u>	<u>Item</u>	<u>Size & Strength</u>	<u>Contract Price</u>
<u>Federal Contract Period: 8/1/02 - 3/31/03</u>			
58160-0850-01	TWINRIX VIAL-IV HEP B VIR RECOMB/ HEP A VIR 20MCG-720U VIAL	1ML x 1	\$36.16 (incl. \$0.75 FET)
58160-0856-01	ENGERIX B PF HEP B VIR VACC RECOMB 10MCG/.5ML VIAL PRES. FREE	.5ML x 1	\$9.00 (incl \$0.75 FET)
58160-0856-11	ENGERIX B PF HEP B VIR VACC RECOMB 10MCG/.5ML VIAL PRES. VIAL	.5ML x 1	\$90.00 (incl \$7.50 FET)
58160-0856-50	ENGERIX-B PF HEP B VIR VACC RECOMB 10MCG/.5ML DISP SYRIN	.5ML x 25	\$231.25 (incl. \$8.75 FET)
58160-0856-46	ENGERIX-B PF HEP B VIR VACC RECOMB 10MCG/.5ML SYRIN	.5ML x 5	\$46.25 (incl. \$8.50 FET)
58160-0856-56	ENGERIX-B PF SAFETY TIP LOCKS 1" 25G RECOMB IV INSY .10MC/ML	.500ML sz 25	\$231.25 (incl. \$8.50 FET)
58160-0856-57	ENGERIX-B PF HEP B VIR VACC RECOMB 10MCG/.5ML DISP SYRIN	.5ML x 25	\$231.25 (incl. \$8.50 FET)
58160-0856-58	ENGERIX-B PF HEP B VIR VACC RECOMB 10MCG.5ML DISP SYRIN	.5ML x 25	\$231.25 (incl. \$8.50 FET)
58160-0840-11	INFRANRIX VIAL DIPHTH, PERTUSS (ACELL), TET PED 25-58-10 VIAL PF	.5ML x 10	\$117.50 (incl. \$22.50 FET)
58160-0840-50	INFANRIX, TIP LOCKS, NEEDLELESS DIPHTH, PERTUSS (ACELL), TET PED 25-58-10 DISP SYRIN	.5ML x 25	\$300.00 (incl. \$56.25 FET)
58160-0837-01	HAVRIX HEPATITS A VIRUS VACCINE 720U/0.5ML VIAL	.5ML x 1	\$11.15
58160-0837-11	HAVRIX HEPATITIS A VIRUS VACCINE 720U/0.5ML VIAL	.5ML x 10	\$111.50
58160-0837-50	HAVRIX, TIP LOCKS HEPATITIS A VIRUS VACCINE 720U/0.5ML DISP SYRIN	.5 ML x 25	\$285.00
58160-0837-46	HAVRIX, TIP LOCKS HEPATITIS A VIRUS VACCINE 720U/0.5ML DISP SYRIN	.5ML x 5	\$57.00
58160-0837-56	HAVRIX, SAFETY TIP LOCKS HEPATITS A VIRUS VACCINE 720U/0.5ML VIAL	.5ML x 25	\$285.00
58160-0837-58	HAVRIX, SAFETY TIP LOCKS HEPATITS A VIRUS VACCINE 720U/0.5ML DISP SYRIN	.5ML x 25	\$285.00

(continued)

PRODUCT LINE: GLAXO SMITHKLINE (con't)

<u>NDC No.</u>	<u>Item</u>	<u>Size & Strength</u>	<u>Contract Price</u>
<u>Federal Contract Period: 7/1/02 - 6/30/03</u>			
58160-0835-01	HAVRIX HEPATITS A VIRUS VACCINE 1.44MU/ML VIAL	1ML x 1	\$19.50
58160-0835-41	HAVRIX HEPATITS A VIRUS VACCINE 1.44MU/ML DISP SYRIN	1ML x 1	\$18.50
58160-0835-46	HAVRIX HEPATITS A VIRUS VACCINE 1.44MU/ML DISP SYRIN	1ML x 5	\$92.50
58160-0857-01	ENGERIX-B PF HEP B VIR VACC RECOMB 20MCG/ML VIAL	1ML x 1	\$25.03 (incl. \$0.75 FET)
58160-0857-50	ENGERIX-B PF HEP B VIR VACC RECOMB TIP LOCKS, NEEDLELESS- IV INSY 20MC/1ML	1ML x 25	\$621.25 (incl. \$18.75 FET)
58160-0857-46	ENGERIX-B PF HEP B VIR VACC RECOMB TIP LOCKS, NEEDLELESS- IV INSY 20MC/1ML	1ML x 5	\$124.25 (incl. \$3.75 FET)
58160-0850-11	TWINRIX VIAL-IV HEP B VIR RECOMB/ HEP A VIR 20MCG-720U VIAL	1ML x 10	\$361.60 (incl. \$7.50 FET)
58160-0850-46	TWINRIX VIAL-IV HEP B VIR RECOMB/ HEP A VIR 20MCG-720U DISP SYRIN	1ML x 5	\$180.80(incl. \$3.75 FET)

Manufacturer: Glaxo SmithKline

Guaranteed Delivery: 10 Days A/R/O

Internet Access: Contractor has catalog available on the internet at www.gsk.com.

Electronic Access Ordering (EDI): Contractor offers Electronic Access Ordering.

Person to contact for expediting New York State contract orders:

Kathleen Dynan Black
 Sr. Mgr., Government Contracts
 800-366-8900
 215-751-7264
 Fax: 215-751-3063
 E-mail: kathleen.d.black@gsk.com
wanda.l.velazquez@gsk.com

(continued)

PRODUCT LINE: GLAXO SMITHKLINE (con't)

Purchases can be made through Glaxo SmithKline's vaccine service center at 888-475-8222.

Person to contact in the event of an emergency occurring after business hours or on weekends/holidays:

Normal Business Hours: M-F 8:00 AM - 8:00 PM

Customer Response Center

1-888-825-5249

E-mail: TradeSalesUs@gsk.com

Web Site: www.gsk.TradeSalesUS.com

CONTRACTOR: SMITHKLINE BEECHAM CORPORATION D/B/A GLAXO SMITHKLINE

SMITHKLINE BEECHAM D/B/A GLAXO SMITHKLINE: "OWN USE"

Issuance of an award in response to the bid will constitute certification by the State of New York, Office of General Services that the GSK products contracted for are solely for their "own use" within the meaning of the Federal Non Profit Institutions Act [15USC Section 13 (c)].

REQUEST FOR CHANGE:

Any request by the agency or contractor regarding changes in any part of the contract must be made in writing to the Office of General Services, Procurement Services Group, prior to effectuation.

CONTRACT PAYMENTS:

Payments cannot be processed by State facilities until the contract products have been delivered in satisfactory condition or services have been satisfactorily performed. Payment will be based on any invoice used in the supplier's normal course of business. However, such invoice must contain sufficient data including but not limited to contract number, description of product or service, quantity, unit and price per unit as well as federal identification number.

State facilities are required to forward properly completed vouchers to the Office of the State Comptroller for audit and payment. All facilities are urged to process every completed voucher expeditiously giving particular attention to those involving cash discounts for prompt payment.

If the contract terms indicate political subdivisions and others authorized by law are allowed to participate, those entities are required to make payments directly to the contractor. Prior to processing such payment, the contractor may be required to complete the ordering non-State agency's own voucher form.

See "Contract Billings" in Appendix B, OGS General Specifications.

ELECTRONIC PAYMENTS:

The Office of the State Comptroller (OSC) offers an "electronic payment" option in lieu of issuing checks. Contact OSC to obtain an information packet at 518-474-4032 or e-mail to epunit@osc.state.ny.us or visit their website at www.osc.state.ny.us.

NOTE TO CONTRACTOR:

This Contract Award Notification is not an order. Do not take any action under this contract except on the basis of purchase order(s) from the agency or agencies.

OVERLAPPING CONTRACT ITEMS:

Products available in this contract may also be available from other State contracts. Agencies should select the most cost effective procurement alternative that meets their program requirements and maintain a procurement record documenting the basis for this selection.

(continued)

PSG's PROTEST POLICY:

It is the policy of the Office of General Services' Procurement Services Group (PSG) to provide vendors with an opportunity to administratively resolve complaints or inquiries related to PSG bid solicitations or contract awards. PSG encourages vendors to seek resolution of complaints through consultation with PSG staff. All such matters will be accorded impartial and timely consideration. Interested parties may also file formal written protests. A copy of PSG's Bid Protest Procedures for Vendors may be obtained by contacting the person shown on the front of this document or through the OGS website (www.ogs.state.ny.us). Click on "For Government - Contracts and Purchasing," then "Seller Information," then "Bid Protest Procedures for Vendors."

CONTRACT TERM:

The NY State contract term is coterminous with the most current Master (CDC and MMCAP) Contracts and any extensions which are approved by the State. Any new product, term, or price changes shall be submitted by the Contractor to the Office of General Services, Procurement Services Group for approval and shall be effective upon the date of issuance of a written notification to New York State contract users. If changes are not approved by OGS, either the contractor or OGS may terminate the Base Contract upon 30 days notice. OGS further reserves the right to terminate this Base Contract either upon cause or in the event that any material modification to the Master Contracts is determined not to be in the best interests of the State.

Upon expiration of the Master Contracts including any approved extension, Contractor may submit any subsequent contracts entered into for the same or similar products with the same Issuing Entity to the Office of General Services, Procurement Services Group. Price adjustments will be automatically approved upon notification to OGS and will become effective upon OGS notification.

In the event Contractor's Master Contract is terminated or not extended by the original Issuing Entity for any other reason and no new contract is let, OGS reserves the right, upon written agreement with Contractor, to extend the Base Contract for a period of one year from the date of such termination.

In the event the Master CDC contract is not renewed, New York State contract may revert to pricing equivalent to MMCAP. Likewise, should MMCAP equivalent prices expire, prices for New York State contract may revert to CDC contract price.

Note: Agency is advised that contracts are predicated upon contractor holding a master contract. Any change in the term of the master contract may effect contract term for NY State. For individual contracts, the period of the current master contract is shown for each product line, in this instance Federal (CDC). Pricing expires on the expiration date of the Federal Contract as shown under each product line.

CONTRACT PERIOD AND RENEWALS:

Price decreases or discount increases are permitted at any time.

If mutually agreed between the Procurement Services Group and the contractor, the contract may be renewed under the same terms and conditions for additional period(s) not to exceed a total contract term of five (5) years.

SHORT TERM EXTENSION:

In the event the replacement contract has not been issued, any contract let and awarded hereunder by the State, may be extended unilaterally by the State for an additional period of up to one month upon notice to the contractor with the same terms and conditions as the original contract including, but not limited to, quantities (prorated for such one month extension), prices, and delivery requirements. With the concurrence of the contractor, the extension may be for a period of up to three months in lieu of one month. However, this extension terminates should the replacement contract be issued in the interim.

OVERLAPPING CONTRACT ITEMS:

Products/services available in the resulting contract may also be available from other New York State contracts. Contract users will be advised to select the most cost effective procurement alternative that meets their program requirements and to maintain a procurement record documenting the basis for this selection.

(continued)

EMERGENCY PURCHASING:

In the event that a disaster emergency is declared by Executive Order under Section 28 of Article 2-B of the Executive Law, or that the Commissioner determines pursuant to his/her authority under Section 163(10)(b) of the State Finance Law that an emergency exists requiring the prompt and immediate delivery of products or services, the Commissioner reserves the right to obtain such products or services from any source, including but not limited to this contract, as the Commissioner in his/her sole discretion determines will meet the needs of such emergency. Contractor shall not be entitled to any claim or lost profits for products or services procured from other sources pursuant to this paragraph.

REPORT OF CONTRACT PURCHASES:

Contractor shall furnish report of purchases made from contract the fifteenth of the month following the end of each six month period. The reports shall be in the following format:

<u>Item/ SubItem Number</u>	<u>Product or Catalog Number</u>	<u>Product/ Service Description</u>	<u>Total Quantity Shipped</u>	<u>Total \$ Value</u>
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The report is to be submitted to the Office of General Services, Procurement Services Group, Tower Bldg., Empire State Plaza, Albany, NY 12242, to the attention of the individual shown on the front page of the Contract Award Notification and shall reference the Group Number, the Invitation for Bids Number, Contract Number, sales period, and contractor's name.

Additional related sales information, such as monthly reports, and/or detailed user purchases may be required and must be supplied upon request.

Failure to submit the required report may be cause for disqualification of contractor for future contracts.

(continued)

**State of New York
Office of General Services
PROCUREMENT SERVICES GROUP
Contract Performance Report**

Please take a moment to let us know how this contract award has measured up to your expectations. If reporting on more than one contractor or product, please make copies as needed. This office will use the information to improve our contract award, where appropriate. **Comments should include those of the product's end user.**

Contract No.: _____ **Contractor:** _____

Describe Product* Provided (Include Item No., if available): _____

***Note:** "Product" is defined as a deliverable under any Bid or Contract, which may include commodities (including printing), services and/or technology. The term "Product" includes Licensed Software.

	Excellent	Good	Acceptable	Unacceptable
• Product meets your needs				
• Product meets contract specifications				
• Pricing				

CONTRACTOR

	Excellent	Good	Acceptable	Unacceptable
• Timeliness of delivery				
• Completeness of order (fill rate)				
• Responsiveness to inquiries				
• Employee courtesy				
• Problem resolution				

Comments: _____

 _____ (over)

Agency: _____ Prepared by: _____

Address: _____ Title: _____

_____ Date: _____

_____ Phone: _____

_____ E-mail: _____

Please detach or photocopy this form & return by FAX to 518/474-2437 or mail to:

OGS PROCUREMENT SERVICES GROUP
 Customer Services, Room 3711
 Corning 2nd Tower - Empire State Plaza
 Albany, New York 12242
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